

CITY OF BLUEFIELD
TREASURY DEPARTMENT
200 ROGERS STREET - BLUEFIELD, WV 24701
(304) 327-2401 ext. 2417

Public Utilities Excise Tax
Bluefield City Code – Chapter 38, Article III

This return is for the month ending _____
Date

___ Check if new address ___ Check if no longer in business

<u>This Tax Return is For</u>
Utility Name: _____
Mailing Address: _____ _____

This return, along with the amount of tax due, must be received by the City Treasurer in the Municipal Building on or before thirty days from the end of the month in which it was collected.

- | | | |
|----|--|-------|
| 1. | Total Monthly Receipts for the Utility | _____ |
| 2. | Less Exemptions (governmental & other taxes) | _____ |
| 3. | Taxable Receipts (line 1 minus line 2) | _____ |
| 4. | Tax Due (multiply line 3 by 2%) | _____ |

Please complete this form in its entirety and return the form with your check made payable to the City of Bluefield to the address listed above.

I hereby certify that the above return is true and correct.

Signature

Title

Telephone Number

Date